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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/091,089 03/06/2002 PAT 6,733,287 *ju*

** FOREIGN APPLICATIONS *****

NONE ju

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/25/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 8	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
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Verified and Acknowledged
 Examiner's Signature *ju* Initials

ADDRESS

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TITLE

Molar tube lock

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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